PATENT APPLICATION FEE DETERMINATION RECOI								Application or Docket Number							
Effective October 1, 2001								09/99/019							
CLAIMS AS FILED - PART I										SMALL ENTITY OTHER THAN					
(Column 1) (Column 2)								TYPE				SMALL			
TOTAL CLAIMS			20-					RAT	Έ·	FEE		RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA			BASIC	FEE	370.00	OR	BASIC FEE	740.00		
TOTAL CHARGEABLE CLAIMS			20 minus 20=		* 0			X\$ 9)=		OR	X\$18=	Ó		
INDEPENDENT CLAIMS			6 minus 3 =		3			X42=			OR	X84=	252		
MU	LTIPLE DEPEN	DENT CLAIM PI	RESENT				+140)=		OR	+280=	Q		
* If the difference in column 1 is less than zero, enter "0" in column 2								TOT	AL		OR	TOTAL			
CLAIMS AS AMENDED - PART II 4/29/10											•	OTHER			
(Column 1) - (Column 2) (Column 3)								SMALL			OR T	SMALL			
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM	IBER OUSLY	PRESENT EXTRA		RAT	Έ	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	. 20	Minus	-2	Ô	= -		X\$ 9)=		OR	X\$18=			
AME	Independent	• 6	Minus	*** (0		X42		=		OR	X84=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM		J	+140)=.		OR	+280=			
									TAL FEE		OR	TOTAL ADDIT FEE			
(Column 1) (Column 2) (Column 3)									ree i		•	ADDII. 1 EE			
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	,	NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**	1011	=		X\$ 9)=	1	OR	X\$18=	164		
	Independent	*	Minus	***		=		X42	=		OR	X84=			
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140				+280=			
	· .							TO	TAL		OR OR	TOTAL			
									FEE			ADDIT. FEE			
_		(Column 1) CLAIMS			mn 2) HEST	(Column 3	ካ :			1001			4004		
ENTC		REMAINING AFTER AMENDMENT		PREVI	MBER OUSLY FOR	PRESENT EXTRA		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE		
NON NON	Total	*	Minus	**				X\$ 9)=		OR	X\$18=			
AMENDMENT	Independent	*	Minus	***	T 01 411		- '	X42	=		OR	X84=			
F	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM +140=										OR	+280=			
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											مرا	TOTAL			
If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." *If the "Highest Number Previously Paid For" (IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.													 _		
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